## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 2/1/13

,	(1)	(2) Annual Premium	(3) Percent	
_	Coverage	- Volume (Illinois) *	Change (+or-) **	
	Automobile Liability Private			
	Passenger	e i de la companya d		
	Commercial			
	<b>Automobile Physical Damag</b>			
	Private Passenger		•	
	Commercial			
	Liability Other Than Auto	*		
	Burglary and Theft			
	Glass	<del>ala atau da la companya da la compa</del>		
	Fidelity	The state of the s	The state of the s	
	Surety		2 (27.1) (4.4.7.1.0) (4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	
	Boiler and Machinery		And the second s	
	Fire	4		
	Extended Coverage	The state of the s		
	Inland Marine		<del>and the state of </del>	
	Homeowners	Taging and the state of the sta		
_	Commercial Multi-Peril	040.050		
	Crop Hail	210,650	7.2%	
	Other	**************************************		
•	Life of Insurance	· · · · · · · · · · · · · · · · · · ·	<u></u>	
	Life of trisurance			
	Does filing only apply to certain territory (territories) or certain Classes? If so,			
	specify: No			
	specify.	The state of the s		
Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):  We are adding two new deductible options and amending the Property rate We are not using rates from any advisory organization.				
(	Organization, specify organization):	We are adding two new deducti		
	Organization, specify organization): We are not using rates from any advisor	We are adding two new deductily organization.		
; ;	Organization, specify organization):	We are adding two new deducting two new deduction.	ble options and amending the Property rates.	
; ;	Organization, specify organization):  We are not using rates from any advisor  *Adjusted to reflect all prior ra  **Change in Company's prem	We are adding two new deduction or several services which will result the changes.	from application of new	
· · · · · · · · · · · · · · · · · · ·	Organization, specify organization):  We are not using rates from any advisor  *Adjusted to reflect all prior ra  **Change in Company's prem	We are adding two new deduction.  Ite changes.  Ite which will result  American Reliable In	from application of new	
· · · · · · · · · · · · · · · · · · ·	Organization, specify organization):  We are not using rates from any advisor  *Adjusted to reflect all prior ra  **Change in Company's prem	We are adding two new deduction.  Ite changes.  Ite which will result  American Reliable In	ble options and amending the Property rates	

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 3/1/2013 NEW AND RENEWAL BUSINESS .

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		-
5.	Glass		·
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
9.	Fire	<u> </u>	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	5,472,255	-0.2%
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•			
	Does filing only apply to certa	in territory (territories) or c	certain
	Classes? If so,		
	specify: Yes, new o	optional endorsement, rules and rates to o	ur all business niche markets for this program.
	Brief description of filing. (If fi	ling follows rates of an ac	lvisory
	Organization, specify		
	Organization): Modification filing introduces new endorsements, rules and rules and rules and rules and rules and rules and rules are revising previously approved endorsements.		
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	ium level which will result	from application of new
	rates.		
			ntral Insurance Company
			ne of Company
		Mark P. Lucas	W
		C	Official – Title

### **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate le	2/1/2013	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> <li>Other</li> </ol>	\$536, 475	+11%
Line of Insurance  Does filing only apply to certain territory (	territories) or certain classes? If so, specif	y: <u>Terr 1</u>
	rates of an advisory organization, specify of lity territory modification factors.	
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rate	es. Oak Fire Insurance Company
		Name of Company  rd, Senior Regulatory Analyst  Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate le	vel produced by rate revision effective	3/1/2013
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
١.	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		.0.00/
	Commercial Multi-Peril	101,251,231	+2.6%
	Crop Hail Other		
١٠.	Line of Insurance		
	Line of insurance		
Doe	es filing only apply to certain territory (	territories) or certain classes? If so, specify:	N/A
	, apply 10 contain terms 1,		
	ef description of filing. (If filing follows purpose of this filing is to revise the rates and m	rates of an advisory organization, specify org	anization):
	ljusted to reflect all prior rate changes. hange in Company's premium level w	hich will result from application of new rates.	
		State Farm F	Fire and Casualty Company
			ame of Company
		Gregory S. Girard - Actu	uary and Assistant Secretary-Treasurer
		· · · · · · · · · · · · · · · · · · ·	Official – Title

## ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	2/1/2013	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> </ol>		
<ol> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> <li>Other</li> </ol>	\$844,557	+11%
Line of Insurance  Does filing only apply to certain territory	(territories) or certain classes? If so, specify	r: <u>Terr 1</u>
	rates of an advisory organization, specify o	
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	which will result from application of new rate	s. elers Indemnity Company
		Name of Company  d, Senior Regulatory Analyst  Official – Title

## ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	2/1/2013	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> <li>Other</li> </ol> Line of Insurance	\$764,655	+11%
Brief description of filing. (If filing follows	(territories) or certain classes? If so, specify rates of an advisory organization, specify collity territory modification factors.	organization):
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rate	Indemnity Company of America
	Holly DuBor	Name of Company  d, Senior Regulatory Analyst  Official – Title

### ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	2/1/2013	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> <li>Other</li> </ol>	\$240,846	+11%
Line of Insurance	territories) or certain classes? If so, specif	y: <u>Terr 1</u>
	rates of an advisory organization, specify of the lity territory modification factors.	
	hich will result from application of new rate	es.
	The Travelers Ir	ndemnity Company of Connecticut Name of Company
	Holly DuBo	rd, Senior Regulatory Analyst Official – Title